Alaska **Cigarette Tax Stamp Order Form**

	•					
Federal ID ☐ EIN ☐ SSN	License Nur	mber	Period (yyyy/mm)	AK Business License Number		
Business Name			Phone Number	Fax Number		
Mailing Address			Contact Person	Contact Phone Number		
City	State	ZIP + 4	Contact Email			

Payment is due at the time of order unless you are approved for deferred payment. Payment must be in the form of a certified check, cashier's check or U.S. Postal Money Order made payable to "State of Alaska"; by wire transfer, or by using the Online Tax Information System (OTIS), the Department of Revenue's Online Payment service. In special circumstances, the department will accept a company check (see instructions).

Electronic Payment Information

Note: If your liability exceeds \$100,000 you must pay using the Online Tax Info	rmation System (OTIS) at www.tax.alaska.gov or by wire transfer.
Check if you are paying by: OTIS (confirmation #)

Check here if you are paying under a deferred payment plan. See instructions for information. If payment is authorized under a deferred payment plan, payment is due by the end of the month following the month the stamps were ordered.

Filling of Stamp Orders. For those paying under a deferred payment plan, stamp orders will be filled within the same business day provided the order is received before 10 a.m. Alaska Standard Time (AST). For all others, stamp orders will be filled once verification of funds has been received by the Tax Division (see instructions).

Stamp Order and Calculation of Cigarette Tax Due

See page 1 of the instructions for definitions of PM and NPM cigarettes.

			PM cigarettes 20 cigarettes/pack		NPM cigare 20 cigarettes		PM cigarettes 25 cigarettes/pack
			Machine stamp rolls (15,000 per roll)	Hand-applied stamps (lots of 150 stamps)	Hand-applied si (sheets of 150 si		Hand-applied stamps (sheets of 150 Stamps)
1	Type and quantity of stamps	1	15,000	150		150	150
2	Number of rolls, lots or sheets	2					
3	Total stamps. Multiply line 1 by line 2	3					
4	Value of each stamp	4	\$ 2.00	\$ 2.00		\$ 2.25	\$ 2.50
5	Tax. Multiply line 3 by line 4	5	\$	\$	\$		\$
6	6 Cigarette tax due. Add the total of all columns in line 5						\$
7	7 Cigarette tax paid with order 7					7	\$
Signature of Licensee, Agent or Designee Date							

Pay online at www.tax.alaska.gov

or make check payable to State of Alaska

Type or print name

Mail to: ALASKA DEPARTMENT OF REVENUE

TAX DIVISION

Title

550 W 7TH AVE STE 500 ANCHORAGE AK 99501-3566

Phone 907-269-6620 • Fax 907-269-6644

Only	Stamp order	Date filled		Funds		
Use	Filled by	Checked by		Funds verified by	Date	
Dept	Batch #		Receipt #		Order #	